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## BIB DATA SHEET

CONFIRMATION NO. 6397

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/540,306	06/20/2005	623	3774	084329-000000US	
<b>RULE</b>					
<b>APPLICANTS</b> Michael O'Rourke, Hunters Hill New South, AUSTRALIA; William Walsh, Marouba New South Wales, AUSTRALIA; Jim Iliopoulos, Bexley North New South Wales, AUSTRALIA; Alberto Pompeo Avolio, North Bondi New South Wales, AUSTRALIA; Ronald Mark Gillies, Enmore, AUSTRALIA; Peter Walsh, Everton Park Queensland, AUSTRALIA;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/AU03/01699 12/19/2003					
<b>** FOREIGN APPLICATIONS *****</b> AUSTRALIA 2002953440 12/19/2002					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/ANN SCHILLINGER/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Indicate	<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWINGS</b> 11	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> TOWNSEND AND TOWNSEND AND CREW, LLP TWO EMBARCADERO CENTER EIGHTH FLOOR SAN FRANCISCO, CA 94111-3834 UNITED STATES					
<b>TITLE</b> Method of treating a stiffened blood vessel					
<b>FILING FEE RECEIVED</b> 1350	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	